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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/564,106	01/09/2006	Alex Zakonov	AVI-0003	7200
7590 09/15/2009 Law Offices of Steven McHugh			EXAMINER	
46 Washington Street			PATEL, JIGAR P	
Middletown, CT 06457			ART UNIT	PAPER NUMBER
			2114	
			MAIL DATE	DELIVERY MODE
			09/15/2009	PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Interview Summary

Application No.	Applicant(s)	
10/564,106	ZAKONOV ET AL.	
Examiner	Art Unit	
JIGAR PATEL	2114	

All participants (applicant, applicant's representative, PTC	D personnel):
(1) <u>JIGAR PATEL</u> .	(3) <u>STEVEN MCHUGH (47,784)</u> .
(2)	(4)
Date of Interview: <u>03 September 2009</u> .	
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)□ applicant	2) applicant's representative]
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e)⊠ No.
Claim(s) discussed: 1.	
Identification of prior art discussed: RITZ ET AL. (US 7.20	63,632 <u>B2)</u> .
Agreement with respect to the claims f) $\hfill \square$ was reached.	g)⊠ was not reached. h)□ N/A.
112 Rejection: Discussion of 35 U.S.C. 102 Rejection. (A fuller description, if necessary, and a copy of the amerallowable, if available, must be attached. Also, where no allowable is available, a summary thereof must be attach THE FORMAL WRITTEN REPLY TO THE LAST OFFICE INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN A NON-EXTENDABLE PERIOD OF THE LONGEL	ndments which the examiner agreed would render the claims copy of the amendments that would render the claims ed.) ACTION MUST INCLUDE THE SUBSTANCE OF THE least Office action has already been filed, APPLICANT IS RONE MONTH ON EMBORING THE THE SUBSTANCE OF THE THE SUBSTANCE OF THE RESTORMENT ON THE SUBSTANCE OF THE RESTORMENT OF THE SUBSTANCE OF THE RESTORMENT OF THE SUBSTANCE OF THE SUBSTANCE OF THE RESTORMENT OF THE SUBSTANCE OF THE SUBSTANC
/Jigar Patel/	